

DRIVEWAY ACCESS PERMIT
Whiteside County Highway Department

18819 Lincoln Rd., Morrison, IL 61270
(815) 772-7651 (815) 772-4870 (Fax)
Russell L. Renner - County Engineer

Address _____ (circle one) N S E W Side of Road
(Street or Road and City) Approx. _____ FT. MI. from _____
(circle one)

Between _____ and _____
(Cross Street or Road) (Cross Street or Road)

Subdivision _____ Lot _____ Block _____ Lot Size _____

TYPE / USE OF ENTRANCE			
A. Type of Entrance		B. Proposed Use	
<input type="checkbox"/> New Building	<input type="checkbox"/> Residential	<input type="checkbox"/> Single Family	<input type="checkbox"/> Non-Residential
<input type="checkbox"/> Circle Drive	<input type="checkbox"/>	<input type="checkbox"/> Two or more Family	<input type="checkbox"/> Industrial
<input type="checkbox"/> 2nd Entrance	<input type="checkbox"/>	<input type="checkbox"/> Garage	<input type="checkbox"/> Commercial
<input type="checkbox"/> Needs Entrance Widened	<input type="checkbox"/>	<input type="checkbox"/> Accessory Building	<input type="checkbox"/> Church
<input type="checkbox"/> Needs Entrance New Location	<input type="checkbox"/>	<input type="checkbox"/> Other	<input type="checkbox"/> School
<input type="checkbox"/> Field Entrance	<input type="checkbox"/>		<input type="checkbox"/> Other

SELECTED CHARACTERISTICS OF ACCESS	
Please check all that apply.	
<input type="checkbox"/> Residential	<input type="checkbox"/> Large Farm Equip.
<input type="checkbox"/> Commercial/Delivery Trucks	<input type="checkbox"/> Large Tractor/Trailer (semi)
<input type="checkbox"/> Farming Equip. (small)	<input type="checkbox"/> School Bus Turn Around
<input type="checkbox"/> Business	

IDENTIFICATION	VALIDATION (for Co. Hwy Dept use)
Owner: _____ (Name) (Phone Number)	Permit # _____
Address: _____ (Street) (City) (Zip)	PPN# _____
Contractor: _____	Permit Issued _____
I hereby certify that the proposed work is authorized by the Owner of record and that I have been authorized by the owner to make this application as his/her authorized agent and we agree to conform to all applicable laws of this jurisdiction.	County Engineer _____
	Twp. Comm. _____
	Township _____
	CULVERT
	Size: _____ Length: _____
	Type: _____
Signature of Applicant _____	
Date _____	

Amount Due for Culvert _____

Permit Fee _____

Total Amount Due _____